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**Topic:** Ebola Updates

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## Information Provided on 11-17-14

**Background:** Ebola, previously known as Ebola hemorrhagic fever, is a rare and deadly disease caused by infection with one of the Ebola virus strains. Ebola can cause disease in humans and non-human primates. Ebola viruses are found in several African countries. Ebola was first discovered in 1976 near the Ebola River in what is now the Democratic Republic of the Congo. Since then, outbreaks have appeared sporadically in Africa. The natural reservoir host of Ebola virus remains unknown; however, on the basis of evidence and the nature of similar viruses, researchers believe the virus is animal-borne and bats are the most likely reservoir.

The 2014 Ebola epidemic is the largest in history, affecting Guinea, Liberia and Sierra Leone in West Africa. CDC has announced that beginning 11.17.14 travelers returning from Mali will be screened. The CDC recommended this measure because there have been a number of confirmed cases of Ebola in Mali in recent days, and a large number of individuals may have been exposed to those cases. Thus, the action is warranted as a precaution due to the possibility that other cases of Ebola may emerge in Mali in the coming days. CDC will continue to reassess this determination on a regular basis going forward.

**Laboratory:** Suspect cases (meeting BOTH the clinical and travel/exposure criteria defined by CDC) identified in Iowa will be sent to CDC for testing. Testing will generally be performed within 24 hours of specimen receipt at CDC. If an entity in Iowa has a possible patient with Ebola, immediately consult with the Iowa Department of Public Health. IDPH, in collaboration with SHL, will assure testing is completed and actions are taken to prevent spread in Iowa.

**IDPH Actions:** IDPH has activated an incident management structure to organize meetings; develop state and local tracking procedures and fact sheets; develop message templates; and other communication tools.

Any suspected cases of Ebola (according to the CDC Guidelines) should be reported immediately to IDPH by phone at **800-362-2736, option 1**.

### Since 11/3/14, IDPH preparedness activities include:

1. Conducting weekly Ebola briefing webinar for local public health, hospitals, and EMS to provide current information. Log in information is sent via the Health Alert Network weekly.
2. Links to guidance, checklists, and factsheets are available on an IDPH Ebola web site: [www.idph.state.ia.us/EHI/Issue.aspx?issue=Ebola Outbreak](http://www.idph.state.ia.us/EHI/Issue.aspx?issue=Ebola%20Outbreak).
3. The State Hygienic Laboratory is providing Ebola related guidance at [www.shl.uiowa.edu/news/ebolaupdate.xml](http://www.shl.uiowa.edu/news/ebolaupdate.xml).
4. IDPH conducted a statewide webinar with EMS services the evening of 11.3.14 to provide EMS specific guidance related to Ebola. IDPH provided a similar briefing at the statewide Iowa EMS Association annual conference on 11.7.14.
5. IDPH hosted an Ebola webinar specific to law enforcement on November 13, 2014. 141 sites viewed the live webinar.
6. IDPH hosted a meeting in collaboration with Africans in Iowa for Empowerment (AIFE) and local public health to share information related to Ebola on November 15<sup>th</sup>.
7. Meeting with with the Iowa Hospital Association and a limited number of "Ebola Ready" hospitals on 11.18.14 to provide definitive care if an individual becomes ill with Ebola. IDPH is working with these facilities to develop a Healthcare Operations Plan for Ebola.
8. IDPH is establishing service agreements with select ambulance services provide transport services for suspected or confirmed Ebola patients.
9. Continuing to use social media and the IDPH Ebola website to provide public information. An Ebola health orders related press release was sent out by IDPH on 11.6.14.
10. Inquiries from healthcare providers and citizens regarding both specific and general concerns are decreasing.
11. Authorized hospitals and local public health agencies to use federal preparedness funds to support acquisition of personal protective equipment and provision of training for staff. A federal funding request has been made to Congress for support of Ebola preparation and response.

**Count of Public Health Orders for Ebola  
Data as of 11.17.2014**

The following table indicates the number of public health orders that have been issued.

There are no suspected or confirmed cases of Ebola in Iowa. No persons in Iowa are being tested for Ebola. No individuals under public health orders are showing symptoms of Ebola at this time. All individuals under public health orders are cooperating with the Iowa Department of Public Health.

Type of Action	# of Current Orders	Total # of Orders Issued since 9.1.14
Self-Monitoring Order	5	14
Quarantine Order	1	1
Isolation Order	0	0

- Self-monitoring Order: *Low risk* travelers are allowed normal activities and twice daily self-monitoring and reporting of temperature and any other Ebola consistent symptoms. No signs of illness are present.
- Quarantine Order: *Some or high risk* travelers are restricted to a specified location (i.e. home) and reporting of temperature (twice daily with at least once in presence of public health official) or any other Ebola consistent symptoms. No signs of illness are present.
- Isolation Order: Travelers with symptoms consistent with Ebola are restricted to a specified location (i.e. hospital room) and are under medical care.

Only state-level data is released to the public. Because of the small number of travelers returning to Iowa from Ebola-affected countries in West Africa, the release of county-level data could lead to identification of an individual, which is in violation of Iowa Code Chapter 22.

**Current U.S. Case Counts, confirmed by CDC**

Source: [www.cdc.gov](http://www.cdc.gov)

Data as of noon 11.17.2014

State	Cases	Total Deaths
Texas	3	1
New York	1	0
Total	4	1

Four cases of Ebola have been confirmed in the United States: one case imported; two healthcare workers that were exposed to the imported case; and 1 healthcare worker exposed in Guinea.

**Count of Individuals Under IDPH Public Health Orders  
for Potential Exposure to Ebola by Risk Level as of  
11.17.14**

The following table indicates the initial evaluation of individuals placed under public health orders.

Risk Level	# of individuals Currently Under an Order	Total # of Individuals Under Order since 9.1.14
Low Risk	5	14
Some Risk	1	1
High Risk	0	0

- *Low Risk* – Travelers from Sierra Leone, Liberia, or Guinea within last 21 days, but no known exposures to Ebola. No signs of illness are present.
- *Some Risk* – Travelers from Sierra Leone, Liberia, or Guinea within last 21 days, who worked directly with patients with Ebola, but had no identified personal protective equipment breaches. No signs of illness are present.
- *High Risk* – Travelers from Sierra Leone, Liberia, or Guinea within last 21 days, who worked directly with patients with Ebola, and had unprotected contact with the bodily fluids of an Ebola patient. No signs of illness are present.

Additional information on risk levels and public health orders are found at:

[www.idph.state.ia.us/IDPHChannelsService/file.ashx?file=A9B0EBCE-5D19-4EBE-9B79-AEDCE005D67F](http://www.idph.state.ia.us/IDPHChannelsService/file.ashx?file=A9B0EBCE-5D19-4EBE-9B79-AEDCE005D67F)

**Current International Case Counts**

Source: [www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/case-counts.html](http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/case-counts.html)

Data as of noon 11.17.2014

Country	Total Cases	Lab Confirmed Cases	Total Deaths
Guinea	1878	1612	1142
Liberia	6822	2553	2836
Sierra Leone	5368	4523	1169
Total	14068	8688	5147

